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CONFIRMATION NO. 8994

Bib Data Sheet

SERIAL NUMBER 09/862,789	FILING DATE 09/21/2001 RULE	CLASS 705	GROUP ART UNIT 2161	ATTORNEY DOCKET NO.
APPLICANTS Sunday Orhomuru, Atlanta, GA;				
** CONTINUING DATA ***** N/A				
** FOREIGN APPLICATIONS ***** N/A				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 12/03/2001				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met <input type="checkbox"/> Allowance <input checked="" type="checkbox"/>		STATE OR COUNTRY GA	SHEETS DRAWING	TOTAL CLAIMS 4
Verified and Acknowledged Examiner's Signature: <i>Sahmeda Jacobs</i> Initials: <i>LS</i>		INDEPENDENT CLAIMS 4		
ADDRESS Sunday Orhomuru 177 Pinetree Circle Decatur, GA 30032				
TITLE Data transfer or transfer of data using wireless mobile phone and any other wireless mobile devices				
FILING FEE RECEIVED 790	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	

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